

United States Bankruptcy Court for the:

Northern District of Georgia

Case number (if known): \_\_\_\_\_ Chapter 11

Check if this is an amended filing

## Official Form 201

### Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/25

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

**1. Debtor's name**

Specialty Cartridge, Inc.

**2. All other names debtor used in the last 8 years**

Atlanta Arms & Ammo

Include any assumed names, trade names, and *doing business as* names

**3. Debtor's federal Employer Identification Number (EIN)**

46-4728187

**4. Debtor's address**

**Principal place of business**

9126 Industrial Blvd.

Number Street

**Mailing address, if different from principal place of business**

Number Street

P.O. Box

Covington GA 30014

City

State

ZIP Code

City

State

ZIP Code

Newton County

County

**Location of principal assets, if different from principal place of business**

Number Street

P.O. Box

City

State

ZIP Code

**5. Debtor's website (URL)**

\_\_\_\_\_

**6. Type of debtor**

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: \_\_\_\_\_

Debtor	Specialty Cartridge, Inc. Name _____		Case number (if known) _____
<p><b>7. Describe debtor's business</b></p> <p>A. Check one:</p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A))  <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44))  <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A))  <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6))  <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3))  <input checked="" type="checkbox"/> None of the above</p> <hr/> <p>B. Check all that apply:</p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501)  <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p> <hr/> <p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <a href="http://www.naics.com/search/">http://www.naics.com/search/</a> .</p> <p style="text-align: center;"><u>3329</u></p>			
<b>8. Under which chapter of the Bankruptcy Code is the debtor filing?</b>	<p>Check one:</p> <p><input type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input checked="" type="checkbox"/> Chapter 11. Check all that apply:</p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,424,000 (amount subject to adjustment on 4/01/28 and every 3 years after that).  <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.  <input type="checkbox"/> A plan is being filed with this petition.  <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form.  <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.</p> <p><input type="checkbox"/> Chapter 12</p>		
<b>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</b>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. District _____ When _____ Case number _____            MM / DD / YYYY</p> <p>If more than 2 cases, attach a separate list.</p> <p>District _____ When _____ Case number _____            MM / DD / YYYY</p>		
<b>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</b>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Debtor _____ Relationship _____            District _____ When _____            MM / DD / YYYY</p> <p>List all cases. If more than 1, attach a separate list.</p> <p>Case number, if known _____</p>		

Debtor Specialty Cartridge, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

**11. Why is the case filed in this district?** *Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**

No

Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

### Statistical and administrative information

**13. Debtor's estimation of available funds** *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**15. Estimated assets**

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input checked="" type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor	Specialty Cartridge, Inc. Name	Case number (if known)	
<b>16. Estimated liabilities</b>	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input checked="" type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion

### Request for Relief, Declaration, and Signatures

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of authorized representative of debtor** The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/07/2025  
MM / DD / YYYY

/s/ Jason Koon

Signature of authorized representative of debtor

Jason Koon

Printed name

Title President

**18. Signature of attorney**

/s/ G. Frank Nason, IV

Signature of attorney for debtor

Date

05/07/2025

MM / DD / YYYY

G. Frank Nason, IV

Printed name

Lamberth, Cifelli, Ellis & Nason, P.A.

Firm name

6000 Lake Forrest Drive, NW Ste. 290

Number Street

Atlanta

City

404-262-7373

Contact phone

GA

30328

State

ZIP Code

fnason@lcnlaw.com

Email address

535160

Bar number

GA

State

## Fill in this information to identify the case:

Debtor name Specialty Cartridge, Inc.United States Bankruptcy Court for the: Northern District of Georgia

Case number (if known): \_\_\_\_\_

 Check if this is an amended filing

## Official Form 204

## Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Fiocchi of America, Inc. 6930 N. Freemont Road Ozark, MO, 65721	Terri Scherff (417) 449-1044 terri@fiocchiusa.com	Suppliers or Vendors				421,644.30
2	Grandeur Fasteners, Inc. 18796 E State Highway 10 Danville, AR, 72833	JJ Munn (479) 489-4532 jjmunn@grandurfasterners.com	Suppliers or Vendors				421,277.88
3	Amerway, Inc. 3701 Beale Ave. Altoona, PA, 16601	Tricia Seymore (814) 944-1688 tricia@amerway.com	Suppliers or Vendors				331,666.80
4	Wieland Metal Services 457 Warwick Industrial Drive Warwick, RI, 02886	Jayne LaForge (401) 739-0800 Jayne.LaForge@wieland.com	Suppliers or Vendors				306,145.87
5	Ammo, Inc. 7681 E. Gray Road. Scottsdale, AZ, 85260	Cheryl McPhillips (480) 530-2827 cmcphillips@ammoninc.com	Suppliers or Vendors				76,800.32
6	Starline Brass 1300 W. Henry Street Sedalia, MO, 65301	Rhiannon Singleton (912) 827-6640 shiannon@starlinebrass.com	Suppliers or Vendors				75,563.34
7	United States Brass & Copper 1401 Brook Drive Downers Grove, IL, 60515	Lisa Korosic (630) 629-9340 lisa@usbrassandcopper.com	Suppliers or Vendors				70,342.92
8	Koenig Shooting Sports 1735 Taylor Woods Road DeLand, FL, 32724	Michelle Koenig	Suppliers or Vendors				48,248.00

Debtor	Specialty Cartridge, Inc. Name	Case number (if known)				
Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9 Thyssenkrupp Materials P. O. Box 7427 Philadelphia, PA, 19170	Ginger Merante (203) 303-8104 virginia.merante@thyssenkrupp-materials.com	Suppliers or Vendors				31,049.90
10 Wilson Tool International P. O. Box 735292 Chicago, IL, 60673	(651) 286-6125	Suppliers or Vendors				25,385.72
11 Georgia Arms P. O. Box 238 Villa Rica, GA, 30180	Heather Shipley (77) 459-5117 heather@georgia-arms.com	Suppliers or Vendors				24,923.00
12 Dame Law, P.C. 2982 Mount Vernon Road Atlanta, GA, 30338		Services				14,605.50
13 Precision Corr 1875 Rockdale Industrial Blvd. Conyers, GA, 30012	Ashley Cantero (770) 225-4159 acantero@precisioncorr.com	Suppliers or Vendors				14,339.67
14 Header Die & Tool, Inc. 3022 Eastrock Court Rockford, IL, 61109	Cheryl Elliott (815) 397-0123 cheryle@header.com	Suppliers or Vendors				14,082.00
15 Oracle NetSuite 15612 Collections Center Drive Chicago, IL, 60693		Utility Services				11,165.00
16 Anco Tool 1094 Echo Lake Road Watertown, CT, 06795	ancotcgl@optonline.com	Suppliers or Vendors				10,415.00
17 Ballistic Agency, 2613 Weston Street Auburn, AL, 36832	Jason Young (888) 256-0692 jyoung@ballisticagency.com	Suppliers or Vendors				8,500.00
18 McMaster-Carr P. O. Box 7690 Chicago, IL, 60680		Suppliers or Vendors				6,074.89
19 American Express P.O. Box 1270 Newark, NJ, 07101		Credit Card Debt				5,620.75
20 IPS Packaging & Automation P. O. Box 63477 Charlotte, NC, 28273	Tammy McLaughlin (864) 861-1500 TMcLaughlin@ipack.com	Services				5,449.52



## Fill in this information to identify the case:

Debtor name Specialty Cartridge, Inc.United States Bankruptcy Court for the: Northern District of Georgia

Case number (if known): \_\_\_\_\_

 Check if this is an amended filing

## Official Form 206A/B

**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

## 1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.  
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
2. Cash on hand			\$ 0.00
3. Checking, savings, money market, or financial brokerage accounts (Identify all)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>Pinnacle Bank (Operating Account)</u>	<u>Checking</u>	<u>9 2 5</u>	<u>\$ 6,098.38</u>
3.2. <u>See continuation sheet</u>			<u>\$ 72,503.26</u>
4. Other cash equivalents (Identify all)			
4.1. _____	\$ _____		
4.2. _____	\$ _____		
5. Total of Part 1	\$ 78,601.64		
Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.			

**Part 2: Deposits and prepayments**

## 6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.  
 Yes. Fill in the information below.

## 7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. <u>Tenant Deposit (SWOF II Convoy 9126, LLC)</u>	\$ <u>91,676.00</u>
7.2. _____	\$ _____

## 8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. \_\_\_\_\_ \$ \_\_\_\_\_  
8.2. \_\_\_\_\_ \$ \_\_\_\_\_

## 9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 91,676.00

## Part 3: Accounts receivable

## 10. Does the debtor have any accounts receivable?

 No. Go to Part 4. Yes. Fill in the information below.

Current value of debtor's interest

## 11. Accounts receivable

11a. 90 days old or less:	840,712.33	-	0.00	= ..... →	\$ 840,712.33
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	450,170.03	-	0.00	= ..... →	\$ 450,170.03
	face amount		doubtful or uncollectible accounts		

## 12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 1,290,882.36

## Part 4: Investments

## 13. Does the debtor own any investments?

 No. Go to Part 5. Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

## 14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_  
14.2. \_\_\_\_\_ \$ \_\_\_\_\_

## 15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_  
15.2. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

## 16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_  
16.2. \_\_\_\_\_ \$ \_\_\_\_\_

## 17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	---	---	------------------------------------

**19. Raw materials**

Projectiles, Powder, Cases, Brass \_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ 1,346,466.98

**20. Work in progress**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**21. Finished goods, including goods held for resale**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**22. Other inventory or supplies**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**23. Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

\$ 1,346,466.98

**24. Is any of the property listed in Part 5 perishable?**

No  
 Yes

**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

No  
 Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**

No  
 Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	---	---	------------------------------------

**28. Crops—either planted or harvested**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**29. Farm animals** Examples: Livestock, poultry, farm-raised fish

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**30. Farm machinery and equipment** (Other than titled motor vehicles)

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**31. Farm and fishing supplies, chemicals, and feed**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**32. Other farming and fishing-related property not already listed in Part 6**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

34. **Is the debtor a member of an agricultural cooperative?** No Yes. Is any of the debtor's property stored at the cooperative? No Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_36. **Is a depreciation schedule available for any of the property listed in Part 6?** No Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture</b>	\$ _____	_____	\$ _____
40. <b>Office fixtures</b>	\$ _____	_____	\$ _____
41. <b>Office equipment, including all computer equipment and communication systems equipment and software</b> Tables, Chairs, Printer, Computer, Desks, Phone, Safes, Filing Cabinets	\$ _____	_____	\$ 10,000.00
42. <b>Collectibles</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles	\$ _____	_____	\$ _____
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____
43. <b>Total of Part 7.</b> Add lines 39 through 42. Copy the total to line 86.	\$ 10,000.00	_____	_____

44. **Is a depreciation schedule available for any of the property listed in Part 7?** No Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			

**47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 CAT 6000 Fork Lift	\$ _____	FMV	\$ 13,000.00
47.2 Nissan 5000 Fork Lift	\$ _____	FMV	\$ 7,500.00
47.3 2012 Ford Transit Connect	\$ _____		\$ 5,500.00
47.4 See continuation sheet	\$ 0.00		\$ 33,000.00

**48. Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

**49. Aircraft and accessories**

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment  
(excluding farm machinery and equipment)**

See continuation sheet

\$ 0.00 \_\_\_\_\_ \$ 12,188,675.00

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$ 12,247,675.00

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

No  
 Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

No  
 Yes

**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1		\$ _____	_____	\$ _____
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ \_\_\_\_\_

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

No  
 Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

No  
 Yes

**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.  
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties DTCC Registration Code M34765	\$ _____	_____	Unknown \$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ 0.00  
\$ \_\_\_\_\_

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No  
 Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes. Fill in the information below.

**Current value of  
debtor's interest**

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ - Total face amount      →      doubtful or uncollectible amount      \$ \_\_\_\_\_

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\_\_\_\_\_ \$ \_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_  
 Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_  
 Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\_\_\_\_\_ \$ \_\_\_\_\_

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\_\_\_\_\_ \$ \_\_\_\_\_

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No  
 Yes

## Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 78,601.64	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 91,676.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 1,290,882.36	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 1,346,466.98	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 10,000.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 12,247,675.00	
88. Real property. Copy line 56, Part 9. . . . .	\$ 0.00	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	\$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 15,065,301.98	91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	15,065,301.98	\$ 15,065,301.98

Debtor 1

Specialty Cartridge, Inc.

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Continuation Sheet for Official Form 206 A/B

## 3) Checking, savings, money market, or financial brokerage accounts

General description	Type of account	Last 4 digits of account number
Bank of America Operating Account	Checking	6850
Balance: 20,502.12		
Bank of America (Payroll Account)	Checking	5667
Balance: 52,001.14		

## 47) Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

General description	Net book value	Valuation method	Current value
2017 Ford T-250 Transit V			20,000.00
2013 Ford E450 Super Duty			13,000.00

## 50) Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

General description	Net book value	Valuation method	Current value
Ammunition Equipment		FMV	2,951,500.00
Test Firearms			25,000.00
Stamping Equipment in Arkansas (Formax 36M and 36M-R, Jen Fab Hot Wash)			4,050,000.00
Stamping Equipment in Covington		FMV	5,162,175.00

## Fill in this information to identify the case:

Debtor name	Specialty Cartridge, Inc.
United States Bankruptcy Court for the:	Northern District of Georgia
Case number (If known):	

Check if this is an amended filing

## Official Form 206D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

## Part 1: List Creditors Who Have Secured Claims

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

## 2.1 Creditor's name

Pinnacle Bank

## Describe debtor's property that is subject to a lien

Stamping Equipment in Covington, Projectiles, Powder, Cases, Brass, Accounts Receivable

Column A  
Amount of claim  
Do not deduct the value of collateral.

Column B  
Value of collateral that supports this claim

\$ 6,185,287.01 \$ 7,805,622.72

## Creditor's mailing address

6124 Highway 278 E  
Covington, GA 30014

## Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

## Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor,

## Describe the lien

Agreement you made

## Is the creditor an insider or related party?

No

Yes

## Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

Contingent

Unliquidated

Disputed

## 2.2 Creditor's name

## Describe debtor's property that is subject to a lien

\$ \_\_\_\_\_ \$ \_\_\_\_\_

## Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

## Do multiple creditors have an interest in the same property?

 No Yes. Have you already specified the relative priority? No. Specify each creditor, including this creditor, and its relative priority.

## Describe the lien

## Is the creditor an insider or related party?

No

Yes

## Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

Contingent

Unliquidated

Disputed

## 3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 6,185,287.01

### Debtor

**Specialty Cartridge, Inc.**

---

Case number (if known)

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
BankFinancial, National Association	Line 2. <u>1</u>	
48 Orland Square		
Orland Park, IL, 60462		
Pinnacle Bank	Line 2. <u>1</u>	
Attn: L. Jackson McConnell, Jr.		
884 Elbert Street		
Elberton, GA, 30635		
	Line 2. <u>  </u>	

Fill in this information to identify the case:

Debtor Specialty Cartridge, Inc.

United States Bankruptcy Court for the: Northern District of Georgia

Case number (If known) \_\_\_\_\_

 Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

## Part 1: List All Creditors with PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

## 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<b>Priority creditor's name and mailing address</b> Georgia Department of Labor 148 Andrew Young International Blvd, NE Atlanta, GA 30303	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>0.00</u>
	<b>Date or dates debt was incurred</b>	<b>Basis for the claim:</b> Taxes & Other Government Units	
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	<b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(8)</b>		
2.2	<b>Priority creditor's name and mailing address</b> Georgia Department of Revenue Compliance Division - ARCS-Bankruptcy 1800 Century Blvd NE, Suite 9100 Atlanta, GA 30345-3202	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>0.00</u>
	<b>Date or dates debt was incurred</b>	<b>Basis for the claim:</b> Taxes & Other Government Units	
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	<b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(8)</b>		
2.3	<b>Priority creditor's name and mailing address</b> Internal Revenue Service Centralized Insolvency Operations P. O. Box 21126 Philadelphia, PA 19114-0326	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>0.00</u>
	<b>Date or dates debt was incurred</b>	<b>Basis for the claim:</b> Taxes & Other Government Units	
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	<b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(8)</b>		

## Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	Amount of claim	
				As of the petition filing date, the claim is: Check all that apply.	\$
3.1	American Express P.O. Box 1270 Newark, NJ 07101			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	5,620.75
				Basis for the claim:	Credit Card Debt
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	
3.2	Amerway, Inc. 3701 Beale Ave. Altoona, PA 16601			As of the petition filing date, the claim is: Check all that apply.	\$ 331,666.80
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Basis for the claim:	Suppliers or Vendors
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	
3.3	Ammo, Inc. 7681 E. Gray Road. Scottsdale, AZ 85260			As of the petition filing date, the claim is: Check all that apply.	\$ 76,800.32
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Basis for the claim:	Suppliers or Vendors
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	
3.4	Anco Tool 1094 Echo Lake Road Watertown, CT 06795			As of the petition filing date, the claim is: Check all that apply.	\$ 10,415.00
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Basis for the claim:	Suppliers or Vendors
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	
3.5	Ballistic Agency, 2613 Weston Street Auburn, AL 36832			As of the petition filing date, the claim is: Check all that apply.	\$ 8,500.00
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Basis for the claim:	Suppliers or Vendors
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	
3.6	Black Hills Shooter Supply P.O. Box 4220 Rapid City, SD 57709			As of the petition filing date, the claim is: Check all that apply.	\$ 4,147.00
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Basis for the claim:	Suppliers or Vendors
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No	
				<input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>7</sup>	Nonpriority creditor's name and mailing address  Clearwave Fiber P. O. Box 808 Harrisburg, IL 62946	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 807.80
		Basis for the claim: Utility Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>8</sup>	Nonpriority creditor's name and mailing address  Dame Law, P.C. 2982 Mount Vernon Road Atlanta, GA 30338	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 14,605.50
		Basis for the claim: Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>9</sup>	Nonpriority creditor's name and mailing address  Duplicating Systems, Inc. 177 Newton Bridge Road Athens, GA 30607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 116.52
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>10</sup>	Nonpriority creditor's name and mailing address  Falcon Plastics 230 Bud Crockett Drive Lexington, TN 38351	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,158.08
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>11</sup>	Nonpriority creditor's name and mailing address  Fiocchi of America, Inc. 6930 N. Freemont Road Ozark, MO 65721	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 421,644.30
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>12</sup>	Nonpriority creditor's name and mailing address  Freedconomics Holdings, LLC 11305 Four Points Drive Bldg. II, Ste. 100 Austin, TX 78726	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Suppliers or Vendors	\$ 5,130.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>13</sup>	Nonpriority creditor's name and mailing address  Georgia Arms P. O. Box 238 Villa Rica, GA 30180	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Suppliers or Vendors	\$ 24,923.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>14</sup>	Nonpriority creditor's name and mailing address  Grainger 66555 Crescent Drive Norcross, GA 30071	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Suppliers or Vendors	\$ 50.37
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>15</sup>	Nonpriority creditor's name and mailing address  Grandeur Fasteners, Inc. 18796 E State Highway 10 Danville, AR 72833	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Suppliers or Vendors	\$ 421,277.88
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>16</sup>	Nonpriority creditor's name and mailing address  GreatAmerican Financial Svcs. 625 First Street SE Cedar Rapids, IA 52401	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Suppliers or Vendors	\$ 306.78
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>17</sup>	Nonpriority creditor's name and mailing address  Header Die & Tool, Inc. 3022 Eastrock Court Rockford, IL 61109	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 14,082.00
		Basis for the claim: Suppliers or Vendors	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____  Last 4 digits of account number _____		
3. <sup>18</sup>	Nonpriority creditor's name and mailing address  Hornady P. O. Box 1848 Grand Island, NE 68802	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,455.86
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>19</sup>	Nonpriority creditor's name and mailing address  Inscio Business Solutions, LLC P. O. Box 1315 Colleyville, TX 76034	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,687.50
		Basis for the claim: Services	
	Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>20</sup>	Nonpriority creditor's name and mailing address  IPS Packaging & Automation P. O. Box 63477 Charlotte, NC 28273	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 5,449.52
		Basis for the claim: Services	
	Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>21</sup>	Nonpriority creditor's name and mailing address  Ken Johnson 12 Dixie Drive Crawfordville, FL 32327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,601.28
		Basis for the claim:	
	Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>22</sup>	Nonpriority creditor's name and mailing address  Koenig Shooting Sports 1735 Taylor Woods Road Deland, FL 32724	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 48,248.00
		Basis for the claim: Suppliers or Vendors	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____		
	Last 4 digits of account number _____		
3. <sup>23</sup>	Nonpriority creditor's name and mailing address  Mark 7 Reloading, LLC 475 Smith Street Middletown, CT 06457	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 569.85
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>24</sup>	Nonpriority creditor's name and mailing address  McMaster-Carr P. O. Box 7690 Chicago, IL 60680	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,074.89
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>25</sup>	Nonpriority creditor's name and mailing address  Oracle NetSuite 15612 Collections Center Drive Chicago, IL 60693	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 11,165.00
		Basis for the claim: Utility Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. <sup>26</sup>	Nonpriority creditor's name and mailing address  Precision Corr 1875 Rockdale Industrial Blvd. Conyers, GA 30012	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 14,339.67
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>27</sup>	Nonpriority creditor's name and mailing address  Precision Punch & Tooling 304 Christian Lane Berlin, CT 06037	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 80.20
		Basis for the claim:	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. <sup>28</sup>	Nonpriority creditor's name and mailing address  Quincy Compressor, LLC P. O. Box 123427 Dallas, TX 75312	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,627.94
		Basis for the claim: Suppliers or Vendors	
Date or dates debt was incurred _____		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>29</sup>	Nonpriority creditor's name and mailing address  R & L Carriers 600 Gillam Road Wilmington, OH 45177	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 170.00
		Basis for the claim: Services	
Date or dates debt was incurred _____		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>30</sup>	Nonpriority creditor's name and mailing address  Randstad P. O. Box 742689 Atlanta, GA 30374	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 714.20
		Basis for the claim: Services	
Date or dates debt was incurred _____		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>31</sup>	Nonpriority creditor's name and mailing address  Safety-Kleen 7027 Commercial Drive Morrow, GA 30260	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,180.00
		Basis for the claim: Suppliers or Vendors	
Date or dates debt was incurred _____		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>32</sup>	Nonpriority creditor's name and mailing address  Selective Solutions, LLC 1479 GA-212 Conyers, GA 30094	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,127.00
Basis for the claim: Services			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. <sup>33</sup>	Nonpriority creditor's name and mailing address  Southern Ballistic Research 140 Indigo Drive Brunswick, GA 31525	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,688.37
Basis for the claim: Services			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>34</sup>	Nonpriority creditor's name and mailing address  Starline Brass 1300 W. Henry Street Sedalia, MO 65301	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 75,563.34
Basis for the claim: Suppliers or Vendors			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>35</sup>	Nonpriority creditor's name and mailing address  TForce Freight, Inc. P. O. Box 1216 Richmond, VA 23218	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,447.33
Basis for the claim: Services			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. <sup>36</sup>	Nonpriority creditor's name and mailing address  Thyssenkrupp Materials P. O. Box 7427 Philadelphia, PA 19170	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 31,049.90
Basis for the claim: Suppliers or Vendors			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>37</sup>	Nonpriority creditor's name and mailing address  United States Brass & Copper 1401 Brook Drive Downers Grove, IL 60515	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 70,342.92
		Basis for the claim: Suppliers or Vendors	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. <sup>38</sup>	Nonpriority creditor's name and mailing address  Viper Security Technologies 8311 Hazlebrand Road NE Covington, GA 30014	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 65.85
		Basis for the claim: Services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>39</sup>	Nonpriority creditor's name and mailing address  Wieland Metal Services 457 Warwick Industrial Drive Warwick, RI 02886	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 306,145.87
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>40</sup>	Nonpriority creditor's name and mailing address  Wilson Tool International P. O. Box 735292 Chicago, IL 60673	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 25,385.72
		Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim:	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	American Express CT Corporation System 289 S. Culver Street Lawrenceville, GA, 30046	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain: _____	
4.2.	IPS Packaging & Automation 701 Brookfield Pakwy Suite 300 Greenville, SC, 29607	Line <u>3.20</u> <input type="checkbox"/> Not listed. Explain _____	
4.3.	Thyssenkrupp Materials 111 Grain Street Kernersville, NC, 27284	Line <u>3.36</u> <input type="checkbox"/> Not listed. Explain _____	
4.4.	Wilson Tool International 12912 Farnham Ave. N White Bear Lake, MN, 55110	Line <u>3.40</u> <input type="checkbox"/> Not listed. Explain _____	
4.1.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.5.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.6.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.7.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.8.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.9.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.10.		Line _____ <input type="checkbox"/> Not listed. Explain _____	
4.11.		Line _____ <input type="checkbox"/> Not listed. Explain _____	

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**

		<b>Total of claim amounts</b>
5a.	<b>Total claims from Part 1</b>	5a. \$ <u>0.00</u>
5b.	<b>Total claims from Part 2</b>	5b. + \$ <u>1,952,432.31</u>
5c.	<b>Total of Parts 1 and 2</b> Lines 5a + 5b = 5c.	5c. \$ <u>1,952,432.31</u>

Fill in this information to identify the case:

Debtor name	Specialty Cartridge, Inc.
United States Bankruptcy Court for the:	<u>Northern District of Georgia</u>
Case number (If known):	Chapter <u>11</u>

Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Lease of 9126 Industrial Blvd, Covington, GA Lessee</p> <p>State the term remaining</p> <p>10 years, 7 months</p> <p>List the contract number of any government contract</p>	<p>SWOF II Convoy 9126, LLC 3927 Whitting Drive NE Atlanta, GA, 30342</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Cash Flow Lease/Master Lease Agreement (Schedule 6) Lessee</p> <p>State the term remaining</p> <p>8 years 5 months</p> <p>List the contract number of any government contract</p>	<p>Pinnacle Bank Attn: L. Jackson McConnell, Jr. 884 Elbert Street Elberton, GA, 30635</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Cash Flow Lease/Master Lease Agreement (Schedule 5) Lessee</p> <p>State the term remaining</p> <p>8 years 1 month</p> <p>List the contract number of any government contract</p>	<p>Pinnacle Bank Attn: L. Jackson McConnell, Jr. 884 Elbert Street Elberton, GA, 30635</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	

## Fill in this information to identify the case:

Debtor name Specialty Cartridge, Inc.United States Bankruptcy Court for the: Northern District of Georgia

Case number (if known): \_\_\_\_\_

 Check if this is an amended filingOfficial Form 206H**Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

## 1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	Check all schedules that apply:
Name	Mailing address	Name	
2.1 Jason Koon	208 St. Andrew Court Social Circle, GA 30025	Pinnacle Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 Jason Koon	208 St. Andrew Court Social Circle, GA 30025	SWOF II Convoy 9126, LL	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.3 Jason Koon	208 St. Andrew Court Social Circle, GA 30025	Pinnacle Bank	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.4 Jason Koon	208 St. Andrew Court Social Circle, GA 30025	Pinnacle Bank	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.5 American Componen	9126 Industrial Blvd. Covington, GA 30014	Pinnacle Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case and this filing:

Debtor Name Specialty Cartridge, Inc.  
United States Bankruptcy Court for the: Northern District of Georgia  
Case number (If known): \_\_\_\_\_

## Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

#### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)*
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)*
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)*
- Schedule H: Codebtors (Official Form 206H)*
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)*
- Amended Schedule \_\_\_\_\_*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)*
- Other document that requires a declaration \_\_\_\_\_*

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/07/2025  
MM / DD / YYYY

 /s/ Jason Koon

Signature of individual signing on behalf of debtor

Jason Koon

Printed name

President

Position or relationship to debtor

United States Bankruptcy Court  
Northern District of Georgia

In re: Specialty Cartridge, Inc.

Case No.

Debtor(s)

Chapter 11

**Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 05/07/2025

/s/ Jason Koon

\_\_\_\_\_  
Signature of Individual signing on behalf of debtor

President

\_\_\_\_\_  
Position or relationship to debtor

American Components Manufacturing and Engineering, Inc.  
9126 Industrial Blvd.  
Covington, GA 30014

American Express  
P.O. Box 1270  
Newark, NJ 07101

American Express  
CT Corporation System  
289 S. Culver Street  
Lawrenceville, GA 30046

Amerway, Inc.  
3701 Beale Ave.  
Altoona, PA 16601

Ammo, Inc.  
7681 E. Gray Road.  
Scottsdale, AZ 85260

Anco Tool  
1094 Echo Lake Road  
Watertown, CT 06795

Ballistic Agency,  
2613 Weston Street  
Auburn, AL 36832

BankFinancial, National Association  
48 Orland Square  
Orland Park, IL 60462

Black Hills Shooter Supply  
P.O. Box 4220  
Rapid City, SD 57709

Clearwave Fiber  
P. O. Box 808  
Harrisburg, IL 62946

Dame Law, P.C.  
2982 Mount Vernon Road  
Atlanta, GA 30338

Duplicating Systems, Inc.  
177 Newton Bridge Road  
Athens, GA 30607

Falcon Plastics  
230 Bud Crockett Drive  
Lexington, TN 38351

Fiocchi of America, Inc.  
6930 N. Freemont Road  
Ozark, MO 65721

Freedconomics Holdings, LLC  
11305 Four Points Drive  
Bldg. II, Ste. 100  
Austin, TX 78726

Georgia Arms  
P. O. Box 238  
Villa Rica, GA 30180

Georgia Department of Labor  
148 Andrew Young International Blvd, NE  
Atlanta, GA 30303

Georgia Department of Revenue  
Compliance Division - ARCS-Bankruptcy  
1800 Century Blvd NE, Suite 9100  
Atlanta, GA 30345-3202

Grainger  
66555 Crescent Drive  
Norcross, GA 30071

Grandeur Fasteners, Inc.  
18796 E State Highway 10  
Danville, AR 72833

GreatAmerican Financial Svcs.  
625 First Street SE  
Cedar Rapids, IA 52401

Header Die & Tool, Inc.  
3022 Eastrock Court  
Rockford, IL 61109

Hornady  
P. O. Box 1848  
Grand Island, NE 68802

Inscio Business Solutions, LLC  
P. O. Box 1315  
Colleyville, TX 76034

Internal Revenue Service  
Centralized Insolvency Operations  
P. O. Box 21126  
Philadelphia, PA 19114-0326

IPS Packaging & Automation  
P. O. Box 63477  
Charlotte, NC 28273

IPS Packaging & Automation  
701 Brookfield Pakwy  
Suite 300  
Greenville, SC 29607

Jason Koon  
208 St. Andrew Court  
Social Circle, GA 30025

Ken Johnson  
12 Dixie Drive  
Crawfordville, FL 32327

Koenig Shooting Sports  
1735 Taylor Woods Road  
Deland, FL 32724

Mark 7 Reloading, LLC  
475 Smith Street  
Middletown, CT 06457

McMaster-Carr  
P. O. Box 7690  
Chicago, IL 60680

Oracle NetSuite  
15612 Collections Center Drive  
Chicago, IL 60693

Pinnacle Bank  
6124 Highway 278 E  
Covington, GA 30014

Pinnacle Bank  
Attn: L. Jackson McConnell, Jr.  
884 Elbert Street  
Elberton, GA 30635

Precision Corr  
1875 Rockdale Industrial Blvd.  
Conyers, GA 30012

Precision Punch & Tooling  
304 Christian Lane  
Berlin, CT 06037

Quincy Compressor, LLC  
P. O. Box 123427  
Dallas, TX 75312

R & L Carriers  
600 Gillam Road  
Wilmington, OH 45177

Randstad  
P. O. Box 742689  
Atlanta, GA 30374

Safety-Kleen  
7027 Commercial Drive  
Morrow, GA 30260

Selective Solutions, LLC  
1479 GA-212  
Conyers, GA 30094

Southern Ballistic Research  
140 Indigo Drive  
Brunswick, GA 31525

Starline Brass  
1300 W. Henry Street  
Sedalia, MO 65301

SWOF II Convoy 9126, LLC  
3927 Whitting Drive NE  
Atlanta, GA 30342

TForce Freight, Inc.  
P. O. Box 1216  
Richmond, VA 23218

Thyssenkrupp Materials  
111 Grain Street  
Kernersville, NC 27284

Thyssenkrupp Materials  
P. O. Box 7427  
Philadelphia, PA 19170

United States Brass & Copper  
1401 Brook Drive  
Downers Grove, IL 60515

Viper Security Technologies  
8311 Hazlebrand Road NE  
Covington, GA 30014

Wieland Metal Services  
457 Warwick Industrial Drive  
Warwick, RI 02886

Wilson Tool International  
P. O. Box 735292  
Chicago, IL 60673

Wilson Tool International  
12912 Farnham Ave. N  
White Bear Lake, MN 55110

United States Bankruptcy Court

IN RE:

Specialty Cartridge, Inc.

Case No. \_\_\_\_\_

Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Registered name and last known address of security holder	Shares (Or Percentage)	Security Class (or kind of interest)
Jason Koon 208 St. Andrews Court, Social Circle, GA 30025	100	Common stockholder

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF GEORGIA  
ATLANTA DIVISION

IN RE: )  
 ) CASE NO. 25-  
SPECIALTY CARTRIDGE, INC. )  
 ) CHAPTER 11  
Debtor )  
\_\_\_\_\_ )

**RULE 2016 DISCLOSURE STATEMENT OF COMPENSATION  
OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am an officer in the law firm of Lamberth, Cifelli, Ellis & Nason, P.A., (the "Firm") and that compensation paid to the Firm within one year before the filing of the petition in bankruptcy, or agreed to be paid to the Firm, for services rendered or to be rendered on behalf of Debtor in contemplation of or in connection with the bankruptcy case is as follows:

- a. For legal services, the Firm will charge its standard hourly rates;
- b. The Firm received \$31,738.00 from Debtor on March 18, 2025, on behalf of Debtor and American Components Manufacturing and Engineering, Inc. ("ACME"). The Firm applied \$11,007.50 to fees incurred through May 1, 2025. The filing fees for this Debtor and ACME totaling \$3,476 were paid out of the amounts paid, leaving an unused retainer balance of \$17,245.50.
- c. The fees have not been shared and will not be shared with any other person, other than members and associates of the Firm.

Dated: May 7, 2025

LAMBERTH, CIFELLI,  
ELLIS & NASON, P.A.  
Attorneys for Debtor

By: /s/ G. Frank Nason, IV  
G. Frank Nason, IV  
Georgia Bar No. 535160

6000 Lake Forrest Drive, NW  
Suite 290  
Atlanta, Georgia 30328  
(404) 262-7373  
(404) 262-9911 (facsimile)